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Are you speaking my language?

New state program will guarantee interpretive services in doctors' offices and clinics for non-English speaking HMO members

(Los Angeles) -- For the first time, California HMO members with limited English-speaking ability will be able to easily communicate with their health plan providers. The California Department of Managed Health Care (DMHC) is developing new regulations that will ensure all health plan members understand what their prescriptions are used for or what they need to do to follow doctor's orders, without having to rely on their children or other family members as interpreters.

"In today's complex medical world, it is crucial that patients understand the instructions given by their doctor, which can be difficult if there is a language barrier," said Cindy Ehnes, Director of the DMHC. "These new regulations will allow millions of Californians with limited or no English-speaking ability to have equal access to health care treatment."

The DMHC regulations will fully implement SB 853 authored by Senator Martha Escutia (D-Montebello) which requires California health plans to set-up a system where services, materials and information are provided to its members in a language they speak and understand.

At an Oakland public hearing, Director Ehnes and others reported that the 2000 Census showed that almost 40 percent of Californians speak a language other than English at home. It has also been reported by Senator Escutia's office that a survey of health care providers showed over 70 percent reported that language barriers affect a patient's understanding of treatment advice and make it harder for patients to explain their symptoms.

(more)

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Also released at the hearing was data compiled by the UCLA Center for Health Policy Research and sponsored by the Office of the Patient Advocate, to illustrate the need for language assistance within California's HMO membership. A sampling of HMO membership shows that for those with care provided through private health insurance, 594,000 adult members (7.2%) reported that they spoke no English at home and 759,000 members (9.2%) reported that they were of limited English-proficiency (LEP). For those belonging to publicly-funded HMOs, 355,000 adult members (17.8%) reported that they spoke no English at home and 428,000 members (21.5%) reported that they have LEP.

"Barriers to health care happen to people of color every day, such as going to the doctor or to fill a prescription, only to find that no one speaks your language," said Ellen Wu, MPH, Executive Director of the California Pan-Ethnic Health Network (CPEHN), sponsor of SB 853. "We are proud of our work to change the rules in California so that our family and friends can understand their doctor and health plan information. Because of these new requirements, a health plan will be accountable for providing quality services to its diverse members. This program is a model for the rest of the country."

The regulations will require each of the 96 full-service and specialty health care plans (e.g. dental, vision) under the DMHC's jurisdiction to develop and implement its own language assistance program. In addition to language assistance, health plans will be required to translate such things as:

- Standard letters and notices of insurance eligibility and membership requirements
- Notices of any denial, reduction, modification, or termination of services and benefits
- Notices of the right to file grievances or appeals

The California Department of Managed Health Care is the only stand-alone HMO watchdog agency in the nation, touching the lives of more than 20 million enrollees. The Department has assisted more than 633,000 Californians through its 24-hour Help Center to resolve their HMO problems, educated consumers on health care rights and responsibilities, and works closely with HMO plans to ensure a solvent and stable managed health care system.

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